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7278 7590 12/11/2007 DARBY & DARBY P.C. P.O. BOX 770 Church Street Station New York, NY 10/008-0770					Certificate of Mailing or Transmission I hereby certify that this Fee(a) Transmittal is being deposited with the United States Fortal Service with sufficient pessage for first class mail in an envelope addressed to the Mail Stop ISSUE 'PE address above, or being fassimilar thansmitted to the USPTO (\$71) 273-2888, on the date indicated below.			
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					(Signature)			
								(Date)
APPLICATION NO. FILING DATE				FIRST NAMED INVENTOR		ATTO	RNEY DOCKET NO.	CONFIRMATION NO.
10/823,396	10/823,396 04/12/2004		Marcus B. J		05986		6/100M724-US1 3661	
TITLE OF INVENTION: FURANONE INHIBITION	B. ANTHRACIS P. OF GROWTH, AI-2	REVENT QUORU	TION AND TR IM SENSING, A	EATMENT: MUTAN AND TOXIN PRODUC	T B. ANTHRACI	S LACK	ING LUXS ACTIVI	TY AND
APPLN, TYPE	SMALL ENTITY	ISSU	E FBE DUE	PUBLICATION FEE D	JE PREV. PAID IS	UE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES		\$720	\$300	\$0		\$1020	03/11/2008
EXAMINER		ART UNIT		CLASS-SUBCLASS	7			
DEVI, SARVAMANGALA JN		1645		536-023700				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1363). Change of correspondence address (or Change of Correspondence Address form PTO/SBI (22) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SBI (22) or more recent) attached. Use of a Customer Number is required.				2. For princing on the pasten front page, list (1) the names of up to 3 registered partent attorneys or a gents OR, alternatively, (2) the name of a single firm (having as a morpher a 2 registered partent attorneys or a gents. If no name is 1 registered partent attorneys or a gents. If no name is 1 listed, to name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (grists or pope) Real Frame: 015883/0945 PLRASE NOTE: (lines an assigne, of identified below, possigne, das well uppeare on the peater, if an assignee is identified below, the document has been file recordation as set form in 107 EASSIGNEE (A) NAME OF ASSIGNEE (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) New York University								
Please check the appropriate	e assignee category or	categorie	s (will not be pr	inted on the patent) :	☐ Individual ☐	Corporati	on or other private gro	up entity Government
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 Change in Entity Status a. Applicant claims S 	MALL ENTITY statu	s. Sec 37		□ b. Applicant is no				
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Authorized Signature	Strilp	alex		Date	March	5, 2008		
Typed or printed name Shilpa V. Patel					Registration	No	57,983	
This collection of informati an application. Confidential submitting the completed a this form and/or suggestion Box 1450, Alexandria, Virg Alexandria, Virginia 22313	on is required by 37 Clifty is governed by 35 pplication form to the s for reducing this burninia 22313-1450. DO -1450.	FR 1.311 U.S.C. I: USPTO. den, shou NOT SE	The information 22 and 37 CFR. Time will vary ald be sent to the ND FEES OR 6	n is required to obtain 1.14. This collection is depending upon the ir chief Information Of COMPLETED FORMS	or retain a benefit be estimated to take 1 dividual case. Any ficer, U.S. Patent and TO THIS ADDRE	y the publ 2 minutes comment d Traden SS. SENI	ic which is to file (and to complete, includin s on the amount of tir nark Office, U.S. Depa D TO: Commissioner	by the USPTO to process g gathering, preparing, and ne you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450